

BLOFIELD RURAL DISTRICT COUNCIL

REPORT of the Medical Officer of Health
for the year 1895.

To the Chairman and ladies and gentlemen of the
Blofield Rural District Council.

Ladies and Gentlemen,

It is with great pleasure and satisfaction that, in submitting to you my annual report for 1895, I have to record a year chiefly remarkable for an exceptionally low death-rate and during which infectious disease has been most conspicuous by its absence.

This year of sanitary rest is especially welcome following as it does on a series of years during which infectious disease has been in the ascendant and during which special efforts have been made to improve the sanitary condition of your District. Without presuming to claim too much as the result of those efforts, it may reasonably be conceded that, in some measure at least, this improvement in the health of the District is due to improved sanitary conditions.

I desire to acknowledge the help derived from perusing the Synopsis of Reports for 1894 prepared by Dr. Cooper Pattin for the Norfolk C.C. A Medical Officer of Health in a Rural District cannot fail to gain much useful information by studying the methods and results of the work of his colleagues in other Districts of the County. It would be an immense advantage if it were possible in any way to strengthen this, the only bond of union.

As in former reports the County Asylum will be considered as outside the district when dealing with statistics.

Population. Taking 30.2 (the average yearly increase for the decennial period 1881 - 91) as the basis of calculation I estimate the population at the middle of 1895 to be 11,375.

Births The total number of births during the year was 290 (females 147 males 143) The birth-rate stands at 25.4 per 1000.

Deaths. The number of deaths registered was 151 which gives an exceedingly low death-rate of 13.2 per 1000 population. This is by far the lowest death-rate recorded since 1884. In 1892 the number of deaths registered was 212 and the death-rate reached 18.5.

Infant Mortality The number of deaths under one year was 32 and births 290 which gives a death-rate per 1000 births of 110.5 This compares favourably with other years though, no doubt, among the 32 infants dying in their first year are included many victims of maternal ignorance.

Old age mortality. The number of deaths at ages over 65 registered during the year was 70 - the rate per 1000 living 6.1

The proportion of deaths of persons of mature age to the total of deaths at all ages is peculiarly high. This is to be accounted for in part by the general absence of sickness and in part by the fact that the severe weather at the beginning of the year proved fatal to many aged persons.

The number of deaths registered as occurring at ages over 70 years was 62 out of a total of 151 at all ages. If the deaths occurring among infants under 1 year (32) be deducted from the total it will be seen that more than one half of the remainder outlived the allotted span of three score years and ten.

ZYMOTIC DISEASE

The subjoined table, giving the distribution of zymotic disease, is compiled from notification certificates received during the year and does not include infectious diseases which are not notifiable.

	Diphtheria.	Typhoid.	Scarletina.	Erysipelas	
South Walsham Sub District	5	2	5	2	
Blofield Sub-district	2	1	-	2	
Thorpe St Andrew	3	-	4	-	
Total	10	3	9	4	27

Table showing fatal cases

	Diphtheria.	Typhoid.	Scarletina.	Erysipelas	
Sth. Walsham Sub-District	0	0	0	0	
Blofield Sub-District	1	0	0	0	
Thorpe St Andrew	1	0	0	0	
Total	2	0	0	0	2

In order that a correct zymotic death-rate may be shown to the two deaths recorded in the above table must be added the death of an infant from whooping cough registered in the Blofield Sub-District. This gives a total of only three deaths from infectious diseases and a zymotic death-rate of .02,- the lowest on record during the last twelve years

Typhoid Fever. The three cases notified were widely separated and had no connection with each other. In one case the patient contracted the disease abroad; in another the source of infection appeared to be Yarmouth and for the third, which was notified from Brundall, the insanitary surroundings of the cottage were a sufficient cause.

Scarlet Fever. The nine cases of scarlet fever were nearly equally divided between the two villages at either end of the district. Those notified from Thorpe will be considered in the special report on that village. Of the five cases in Acle, four were among inmates of the same cottage and the fifth case, which occurred three weeks later, was doubtless the result of the extension of the infection.

Diphtheria. Ten cases were notified. Three from Thorpe and the remaining seven widely distributed, as to time of year and locality, in the rest of the district. Two children age respectively 2 yrs. and 6 months died from this cause.

Diseases not included in the Notification Act. Whooping cough, measles and mumps were less prevalent than usual. On the North side of Blofield and Hemblington, however, mumps was prevalent towards the end of the year and necessitated the School being closed from Nov. 21st to Dec. 2nd. Only one death was registered as due to whooping cough. No deaths occurred from measles or mumps.

Closure of Schools for infectious disease. With the exception of the Hemblington School, which was closed for a fortnight in consequence of mumps, it was not found necessary to advise the closing of any school in the district.

Isolation Hospital. It may perhaps be considered unseasonable to discuss the subject of the provision of an Isolation Hospital at a time when the District is to be congratulated on the exceedingly small amount of infectious disease within its borders. It is my duty, however, to direct your attention to a memorandum on the provision of Isolation Hospital accommodation by Local Authorities which I have received from Dr. Thorne Thorne, the Medical Officer to the Local Government Board. A section of this memorandum refers to isolation in villages and recommends that either the Local Authority should acquire a four or six roomed cottage for each large village or group of villages, or, as an alternative, that arrangement should be made with some trustworthy cottage-holders, not having children, that they should receive and nurse, on occasion, patients requiring such accommodation.

This system certainly appears more adapted to the requirements of a rural population than the erection of a central hospital. I would suggest that members of your Council might well consider whether cottages suitable for such a purpose are to be found in their respective parishes.

Sanitary work. The Inspector furnishes me with the following summary of nuisances dealt with during the past year:- Water supply 17; Privies and bins 36; Drains and Sewers 45; Slaughter houses 5;

Pig sheds 9; Collections of filth etc.13; Overcrowding 3.
Total 128.

The three cases of overcrowding were satisfactorily remedied and in one only were legal proceedings necessary.

The Acle Parish Council are to be congratulated on their excellent work in commencing a system of drainage for the village. Already "the green" is provided with trapped gullies of an excellent pattern which communicate with a well-laid drain fitted with inspection chambers, ventilating shaft etc. which carries the sewage down the New Road. It is to be hoped that the Parish Council about to be elected will be able to carry on the work so well begun by their predecessors in office.

THORPE VILLAGE

Population, census 1891, 1317 (without Asylum)

" annual rate of increase 10.4

" estimated for 1895 1360

Births 28 birth-rate 20.6

Deaths 15 death-rate 11.03

Summary of deaths -

From Diphtheria 1 (aged 6 months)

" Diarrhoea 1 (aged 1 month)

" Violence 2

At ages over 65 5

At other ages and from

other causes 6
15

Zymotic death-rate .07

The following table gives the estimated population, the number of deaths, the death-rate and Zymotic death-rate for each year since the last census.

Year	Population.	Number of deaths.	Death-rate.	Zymotic Death-rate.
1891	1317	26	19.69	.13
1892	1330	20	15.0	4.5
1893	1340	26	19.1	2.1
1894	1350	18	13.3	0
1895	1360	15	11.03	.07

If statistics can be relied on it is obvious that the health of this village has considerably improved during the last four years. The death-rate, it will be seen, has fallen from 19.69 in 1891 to 11.03 in the past year - a death-rate of which any health resort might be well proud. During the last two years (1894 and 95)

only one death has been registered as due to infectious disease.

Such facts as these should silence the cry of "unsanitary Thorpe" raised by persons either influenced by unworthy motives or altogether ignorant of the privilege they enjoy of living in a locality where sanitation is the first thought of the Authorities.

At the same time it must not be denied that this village is in need of the extra care bestowed upon it. It is situated on the outskirts of a large population with which its inhabitants have constant intercourse and through which, no doubt, from time to time infectious disease will be imported. Its cottages are crowded together without much garden land and through it flows a river carrying a certain percentage of Norwich sewage.

Recently, however, I have been led to believe that the greatest danger threatening the health of Thorpe and especially of its Eastern end is to be found in the sewage form.

On a comparatively small area of land the sewage of a large city is distributed; the same field being under irrigation for four or five months at a time. Here and there are large stagnant pools of sewage and at other points are seen dirty-white masses of foam where the sewage is churned up in its rapid passage to the river through narrow channels.

It can be well conceived that, just as the health-giving saline particles from sea-foam are borne long distances over the land by sea breezes, so may the death-dealing germs from this sewage-foam be carried to Thorpe and neighbouring villages whenever the wind is from a certain quarter.

On this hypothesis could be explained the mysterious incidence of zymotic disease at the County Asylum for which, after the most careful investigation, no other cause can be assigned. It would also be the key to many cases of infectious disease, especially in the East side of Thorpe for which no cause could be found.

From letters I am constantly receiving from the inhabitants of Thorpe and Postwick complaining of the sickening smell which compels them to close their windows whenever the wind is from the S.W. I am convinced that evil-smelling gases, in themselves injurious to health, reach these villages from the sewage form in large volumes - whether or not these gases are accompanied by microbes might possibly be determined by careful scientific investigation.

It is a question that I especially commend to the attention of the Norfolk County Council affecting, as it probably does, more than one Rural District.

I am pleased to be able to record that the dredging of the old river is now an accomplished fact. The large quantity of sludge raised from the bed of the river is proof of the necessity of carrying out this costly work.

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One complaint has been received as to impure water. It was from a newly driven tube well. The impurity was inorganic in character and of no vital importance.

A case of over crowding has been successfully dealt with.

The station road ditch which receives the drainage from the tan yard and some houses in its neighbourhood has occupied my attention and been the subject of a report to the Parochial Committee. Up to the present no decision has been arrived at as to the best way of dealing with this nuisance. The difficulties in the way are chiefly of a legal nature.

Only two or three bins have been converted to the pail system during the year. There still remains work to be done in this direction.

The scavenging has been carried out in a most satisfactory way and the system is more appreciated by the people.

The County Asylum An annual report on the health of this institution is furnished by the Resident Medical Superintendent.

During the past year I have received notification of two cases of scarlet fever and one of typhoid fever - this latter a fatal case.

It is noteworthy that among the 77 deaths in this institution as many as 15 were certified as due to Phthisis:

I have the honour to remain
Your obedient Servant
Herbert H. Back M.B.
Med. Off. of Health.

Reepham

March 14th 1896.

APPENDIX

Statistics for the whole District (excluding Asylum)

Area in Acres 43,784.

Census population 11,246 (excluding Asylum 799)

Density of population 1 to 3½ acres

Births, 290; Deaths 151

Deaths under 1 year of age 32.

Deaths at over 65 years of age 70.

Deaths from several principal zymotic diseases 3. (Viz: Diphtheria 2; Whooping cough 1) (Asylum Typhoid 1)

Birth rate 25.4 Death rate 13.2 per 1000 population.

Zymotic deathrate .02

Death rate from Phthisis .7 (In Asylum 18.8 per 1000 pop.)

' ' other lung diseases 1.05 ('1.1 ')

' ' heart disease 1.1

Infant mortality 110.5 per 1000 births.

